

POLICY

Staff in residential juvenile justice facilities may only mechanically restrain a youth to regain control of a youth who presents an imminent danger of injury to self or others or a clear risk of substantial damage to property. Mechanical restraints may also be used to prevent escape of a youth during transport (for example, from the facility to court). Staff applying mechanical restraints must be properly trained in the use of those restraints.

This policy applies to secure facilities only. Non-secure facilities may not use mechanical restraints.

PURPOSE

To ensure the appropriate use of mechanical restraints for the safety of each youth, staff and the public.

DEFINITIONS

See JRG, JJ Residential Glossary.

**RESPONSIBLE
STAFF**

Facility director and direct care staff authorized and trained in the use of mechanical restraints. Responsible staff also include medical staff and other staff trained to conduct post-restraint examinations of restrained youth.

PROCEDURE

Each facility must develop and implement a written procedure for youth mechanical restraint. The written procedure must contain the following requirements:

**De-escalation to
Minimize Use of
Mechanical
Restraint**

Staff must use therapeutic crisis intervention strategies as outlined in the crisis intervention continuum to de-escalate a youth and prevent cases where the youth is out-of-control and must be mechanically restrained.

**Criteria for Use
of Mechanical
Restraint**

Staff must develop and implement a plan to remove other youths from the vicinity when a youth is restrained or is likely to be restrained.

Mechanical restraint may only be used for the minimum time necessary.

Mechanical restraint must not be used as punishment or as a means of coercion.

A youth must not be mechanically restrained to any other person or immovable object.

A supervisor must approve in writing any mechanical restraint lasting more than 30 minutes. The written approval must be approved for each 30 minute interval thereafter. If mechanical restraint duration exceeds 90 minutes, the facility director or designee must be notified immediately.

Staff must use the minimum amount of force necessary for mechanical restraint. Staff may use mechanical restraints as a last resort for any of the following reasons:

- Self-protection.
- Physical protection of the restrained youth, staff and/or others.
- Prevention of substantial damage to property.

Note: Staff may exercise their discretion in determining the nature of substantial damage consistent with the objective of minimizing restraints. Damage that would produce a safety risk (for example, broken glass), compromise security features, or that the staff would estimate to exceed \$100 in value constitutes substantial damage.

- Use associated with apprehension of a youth in escape status or to prevent escape during movement or transport to and from a secure residential facility.

Note: The use of mechanical restraints is not authorized in non-secure facilities.

**Approved
Mechanical
Restraint
Devices**

The Bureau of Juvenile Justice director must approve all mechanical restraint devices used by facility personnel at least every three years. Effective December 1, 2010, the following are the only approved mechanical restraint devices:

- Handcuffs.
- Leg shackles.
- Leg braces.
- Leather restraints (legs and hands).
- Polypropylene (cloth) arm and leg restraints.
- Belly/waist chains.
- Cranial helmet.
- Anti-mutilation gloves.
- Restraint blankets.
- Spit shields.

Note: Plastic shields and associated gear used as protection by staff in restraint situations are not restraint devices, but are approved for use as directed by the facility director.

Monitoring

Staff must directly supervise any youth in mechanical restraints at all times.

When moving a youth from place to place, staff must remain alert to trip and fall hazards and guide the restrained youth accordingly.

Video monitoring of a youth in mechanical restraints may supplement, but may not replace direct staff supervision.

Staff must immediately notify the facility director or designee in any case where a pregnant youth is mechanically restrained.

**Post Mechanical
Restraint
Reviews and
Access to
Grievance
System**

Following a mechanical restraint:

- Medical staff must conduct a visual examination of any youth restrained within 15 minutes of the removal of restraints. If medical staff is unavailable, the on-duty supervisor must conduct this visual examination. The results of the examination must be documented in facility logs including the full name of the youth restrained, the date/time of the mechanical restraint, the full name and title of the examiner, and the results of the examination.
- Staff must provide first aid and/or seek immediate medical attention for injuries received by any youth or staff. Staff must document any injuries and any first aid or other medical treatment provided on an incident report.
- The facility director must review the non-transport use of mechanical restraints to determine if procedures were followed and take any corrective action needed.
- Staff must involve the youth(s) in a review of the restraint including problem-solving for behaviors leading up to the restraint.
- Staff must remind each youth who is mechanically restrained of their right to file a grievance under the youth grievance process and provide a grievance form as needed.

**Video and Audio
Record
Retention**

The facility director or designee must ensure that any video or audio recording documenting the mechanical restraint is retained for a minimum of two years.

Documentation

Following a mechanical restraint, staff must make appropriate log entries and complete an incident report.

Applicable mechanical restraint log entries include all of the following:

- Youth behavior(s) prior to and during the restraint.
- Crisis intervention actions taken by staff and results.
- If a physical restraint occurred that was associated with the mechanical restraint. See JR6 610, Physical Restraint.
- Start and ending times of the mechanical restraint.
- Type of mechanical restraint(s) used and application location (for example, hands, feet, etc.).
- Full name(s) of staff applying the mechanical restraint(s).
- Injuries received by each youth and staff (as applicable).
- Post-restraint examination results including full name and title of the person performing the examination.
- First aid and other medical treatment provided including the full name and title of the person providing the treatment (as applicable).

Note: In cases where the type of mechanical restraint(s) used or application location changes, staff log entries must clearly document the change and the names of the staff removing and re-applying the restraints.

Training

All direct care staff must satisfactorily complete the crisis intervention continuum and mechanical restraint training provided by the Child Welfare Training Institute prior to supervising youths alone.

Direct care staff must attend and pass quarterly refresher training on verbal de-escalation, physical restraint, and mechanical restraint methods.

Documentation that staff received the initial and refresher crisis intervention continuum and mechanical restraint training must be retained. See JR1 170, Staff Development and Training.

Facility directors must ensure that supervisors receive initial and biennial training from medical staff in procedures for post-restraint examinations if 24 hour medical services are not available.

**Cleaning,
Maintenance,
Inventory, and
Storage
Requirements**

Facility written procedures must define cleaning, maintenance, inventory, and storage requirements for mechanical restraint devices.

AUTHORITY

Social Welfare Act, 1939 PA 280, as amended, MCL 400.115a(1)(l)

Child Caring Institutions Rules, R400.4137